



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[30Day-15-0666]

Agency Forms undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) has submitted the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The notice for the proposed information collection is published to obtain comments from the public and affected agencies.

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address any of the following: (a) Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility; (b) Evaluate the accuracy of the agencies estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used; (c) Enhance the quality, utility, and clarity of the information to be collected; (d) Minimize the burden of

the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses; and (e) Assess information collection costs.

To request additional information on the proposed project or to obtain a copy of the information collection plan and instruments, call (404) 639-7570 or send an email to omb@cdc.gov. Written comments and/or suggestions regarding the items contained in this notice should be directed to the Attention: CDC Desk Officer, Office of Management and Budget, Washington, DC 20503 or by fax to (202) 395-5806. Written comments should be received within 30 days of this notice.

Proposed Project

National Healthcare Safety Network (NHSN) (OMB No. 0920-0666, exp. 12/31/2017) - Revision - National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

The National Healthcare Safety Network (NHSN) is a system designed to accumulate, exchange, and integrate relevant

information and resources among private and public stakeholders to support local and national efforts to protect patients and promote healthcare safety. Specifically, the data is used to determine the magnitude of various healthcare-associated adverse events and trends in the rates of these events among patients and healthcare workers with similar risks. The data will be used to detect changes in the epidemiology of adverse events resulting from new and current medical therapies and changing risks. The NHSN currently consists of five components: Patient Safety, Healthcare Personnel Safety, Biovigilance, Long-Term Care Facility (LTCF), and Dialysis. The Outpatient Procedure Component is on track to be released in NHSN in 2016/2017. The development of this component has been previously delayed to obtain additional user feedback and support from outside partners.

Changes were made to seven facility surveys. Based on user feedback and internal reviews of the annual facility surveys it was determined that questions and response options be amended, removed, or added to fit the evolving uses of the annual facility surveys. The surveys are being increasingly used to help intelligently interpret the other data elements reported into NHSN. Currently the surveys are used to appropriately risk adjust the numerator and denominator data entered into NHSN

while also guiding decisions on future division priorities for prevention.

Additionally, minor revisions have been made to 27 forms within the package to clarify and/or update surveillance definitions. Two forms are being removed as those forms will no longer be added to the NHSN system.

The previously approved NHSN package included 54 individual collection forms; the current revision request removes two forms for a total of 52 forms. The reporting burden will increase by 583,825 hours, for a total of 4,861,542 hours.

Estimated Annualized Burden Hours

Type of Respondents	Form Name	No. of Respondents	No. of Responses per Respondent	Avg. Burden per Response (in hrs.)
Registered Nurse (Infection Preventionist)	NHSN Registration Form	2,000	1	5/60
Registered Nurse (Infection Preventionist)	Facility Contact Information	2,000	1	10/60
Registered Nurse (Infection Preventionist)	Patient Safety Component-- Annual Hospital Survey	5,000	1	50/60
Registered Nurse (Infection Preventionist)	Group Contact Information	1,000	1	5/60
Registered Nurse	Patient Safety Monthly	6,000	12	15/60

(Infection Preventionist)	Reporting Plan			
Registered Nurse (Infection Preventionist)	Primary Bloodstream Infection (BSI)	6,000	44	30/60
Registered Nurse (Infection Preventionist)	Pneumonia (PNEU)	6,000	72	30/60
Registered Nurse (Infection Preventionist)	Ventilator-Associated Event	6,000	144	25/60
Registered Nurse (Infection Preventionist)	Urinary Tract Infection (UTI)	6,000	40	20/60
Staff RN	Denominators for Neonatal Intensive Care Unit (NICU)	6,000	9	3
Staff RN	Denominators for Specialty Care Area (SCA)/Oncology (ONC)	6,000	9	5
Staff RN	Denominators for Intensive Care Unit (ICU)/Other locations (not NICU or SCA)	6,000	60	5
Registered Nurse (Infection Preventionist)	Surgical Site Infection (SSI)	6,000	36	35/60
Staff RN	Denominator for Procedure	6,000	540	5/60
Laboratory Technician	Antimicrobial Use and Resistance (AUR) - Microbiology Data Electronic Upload Specification Tables	6,000	12	5/60

Pharmacy Technician	Antimicrobial Use and Resistance (AUR)-Pharmacy Data Electronic Upload Specification Tables	6,000	12	5/60
Registered Nurse (Infection Preventionist)	Central Line Insertion Practices Adherence Monitoring	1,000	100	25/60
Registered Nurse (Infection Preventionist)	MDRO or CDI Infection Form	6,000	72	30/60
Registered Nurse (Infection Preventionist)	MDRO and CDI Prevention Process and Outcome Measures Monthly Monitoring	6,000	24	15/60
Registered Nurse (Infection Preventionist)	Laboratory-identified MDRO or CDI Event	6,000	240	30/60
Registered Nurse (Infection Preventionist)	Long-Term Care Facility Component - Annual Facility Survey	250	1	1
Registered Nurse (Infection Preventionist)	Laboratory-identified MDRO or CDI Event for LTCF	250	8	15/60
Registered Nurse (Infection Preventionist)	MDRO and CDI Prevention Process Measures Monthly Monitoring for LTCF	250	12	5/60
Registered Nurse (Infection Preventionist)	Urinary Tract Infection (UTI) for LTCF	250	9	30/60
Registered	Monthly	250	12	5/60

Nurse (Infection Preventionist)	Reporting Plan for LTCF			
Registered Nurse (Infection Preventionist)	Denominators for LTCF Locations	250	12	3.25
Registered Nurse (Infection Preventionist)	Prevention Process Measures Monthly Monitoring for LTCF	250	12	5/60
Registered Nurse (Infection Preventionist)	LTAC Annual Survey	400	1	50/60
Registered Nurse (Infection Preventionist)	Rehab Annual Survey	1,000	1	50/60
Occupational Health RN/Specialist	Healthcare Personnel Safety Component Annual Facility Survey	50	1	8
Occupational Health RN/Specialist	Healthcare Personnel Safety Monthly Reporting Plan	17,000	1	5/60
Occupational Health RN/Specialist	Healthcare Worker Demographic Data	50	200	20/60
Occupational Health RN/Specialist	Exposure to Blood/Body Fluids	50	50	1
Occupational Health RN/Specialist	Healthcare Worker Prophylaxis/Treatment	50	30	15/60
Laboratory Technician	Follow-Up Laboratory Testing	50	50	15/60
Occupational Health RN/Specialist	Healthcare Worker Prophylaxis/Treatment-Influenza	50	50	10/60
Medical/Clinical Laboratory	Hemovigilance Module Annual	500	1	2

Technologist	Survey			
Medical/Clinical Laboratory Technologist	Hemovigilance Module Monthly Reporting Plan	500	12	1/60
Medical/Clinical Laboratory Technologist	Hemovigilance Module Monthly Reporting Denominators	500	12	1
Medical/Clinical Laboratory Technologist	Hemovigilance Adverse Reaction	500	48	15/60
Medical/Clinical Laboratory Technologist	Hemovigilance Incident	500	10	10/60
Staff RN	Patient Safety Component—Annual Facility Survey for Ambulatory Surgery Center (ASC)	5,000	1	5/60
Staff RN	Outpatient Procedure Component - Monthly Reporting Plan	5,000	12	15/60
Staff RN	Outpatient Procedure Component Event	5,000	25	40/60
Staff RN	Outpatient Procedure Component - Monthly Denominators and Summary	5,000	12	40/60
Registered Nurse (Infection Preventionist)	Outpatient Dialysis Center Practices Survey	6,500	1	2.0
Staff RN	Dialysis Monthly Reporting Plan	6,500	12	5/60
Staff RN	Dialysis Event	6,500	60	25/60
Staff RN	Denominators for Dialysis Event Surveillance	6,500	12	10/60
Staff RN	Prevention Process Measures Monthly	1,500	12	1.25

	Monitoring for Dialysis			
Staff RN	Dialysis Patient Influenza Vaccination	325	75	10/60
Staff RN	Dialysis Patient Influenza Vaccination Denominator	325	5	10/60

Leroy A. Richardson,

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